# Ennerdale Rural District

# ANNUAL REPORT

OF THE

# MEDICAL OFFICER OF HEALTH

For the Year 1947

J. W. INNES, M.A., M.B., Ch.B., D.P.H.

MEDICAL OFFICER OF HEALTH

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# ENNERDALE RURAL DISTRICT COUNCIL. HEALTH AND HOUSING COMMITTEE.

#### Chairman:

#### Councillor LOWREY.

## Members ex-officio:

The Chairman of the Council—Councillor COOK.

The Vice-Chairman of the Council—Councillor THOMPSON.

#### Members:

Councillors—MISS DAVIS, DENWOOD, HANNAH, MRS.
LISTER, REV. F. K. McCANN, MIDDLETON,
MURRAY, NOCTOR, PHARAOH, QUAYLE,
THOMPSON.

# REPRESENTATIVES ON WEST CUMBERLAND JOINT HOSPITAL COMMITTEE.

#### Councillors-LOWREY and MURRAY.

#### STAFF.

J. V	W. INNES, $M.A.$ ,	M.B.	Ch.B., D.P.I	$\mathcal{H}$ .	
11			Medica	al Officer	of Health
x*†	R. BROWN	Chief	Sanitary Insp	ector and	Surveyor
x*†	J. BUTTERY		Additional	Sanitary	Inspector
*§	J. LEIGH	••••	Additional	Sanitary	Inspector
*†	R. M. HOWELLS		Additional	Sanitary	Inspector
	R. SEEDS	1	Pupil	Sanitary	Inspector
	MISS I. DAVIDS	ON			Clerk

- \* Sanitary Inspector's certificate Royal Sanitary Institute.
- † Certificate Meat and Other Foods (R.S.I.).
- § Certificate Meat and Other Foods, Liverpool University.
- x Certificate in Sanitary Science as applied to Buildings and Public Works.

# 81 LOWTHER STREET, WHITEHAVEN.

18th June, 1947.

To the Chairman and Members of the Ennerdale Rural District Council.

#### MR. CHAIRMAN, LADIES and GENTLEMEN,

I beg to present my Annual Report for 1946.

The year on the whole was uneventful as far as Health conditions were concerned, and the statistics for the year present quite an average picture.

Deaths were slightly more—the rate rising by 0.7, but it was still under the rate for the whole country by 0.3.

The Birth Rate was 1.7 higher at 19.4, which was 0.1 under the rate for the County and 0.3 above the rate for the whole country.

The Infantile Mortality Rate was not so good as in the previous year, which, however, was abnormally low. At 59 infantile deaths per thousand live births, it was 20 above the previous year's figure and 12 in excess of the County rate. Owing to the fluctuations one gets from year to year when dealing with rates calculated on small numbers, it is unsafe to lay too much emphasis on the rate for a single year, but one might say that it was distinctly unfortunate that included in these deaths were several of a preventible character.

We have received a good deal of prominence in regard to Tuberculosis so it is pleasing to be able to state that the slight improvement noted in last year's report has been more than maintained and that this year there is a very substantial improvement to record. The death rate from this disease fell by no less than 0.33. At 0.75, although it was still almost 50% higher that the rate for the whole country, it was easily the best that has ever been recorded since the formation of the District. It was no less than 0.53 under the average rate for Ennerdale for the previous twelve years since the formation of the District. One would not, however, dream of basing rash claims on the figures for a single year. Better to content oneself with expressing the hope that the improvement may continue, thus enabling the spotlight to travel to other districts that may be even less fortunately situated, whilst reserving one's judgment on the relative therapeutic properties of hot versus fresh air.

With regard to other notifiable diseases the position was very satisfactory, the District remaining remarkably free from disease of an epidemic nature. Unfortunately there was again a death from Diphtheria. Why will parents not protect their children when it can be done so easily? The only other death from Infectious Disease (apart from Tuberculosis and Pneumonia) was one from Cerebro-Spinal Fever.

I do not think any other matters call for special comment at this point. To say anything about the progress of the many housing schemes the Authority has in hand would be a mere repetition of what is being said all up and down the country.

My thanks are again due to Mr. Brown and the members of the Sanitary staff for their loyal support and assistance, to the Officials of other departments for their willing help and co-operation in every way, and to the Chairman and Members of the Health and Housing Committee for their continued support and consideration.

I am,

Mr. Chairman, Ladies and Gentlemen,
Your obedient servant,
J. W. INNES,

Medical Officer of Health.

# ENNERDALE RURAL DISTRICT.

A. I.—GENERAL	STA	TIST	ICS.	
Area of the Rural District of Population (Registrar-General				88,730
year, 1946 Number of Inhabited House	ses (ei	nd of	1946)	26,690
according to Rate Books		• • • •	• • • •	7,461
Rateable Value (1st April, 19			£1	02,635
Sum represented by a Penny	Rate	20.00	• • • •	£365
II.—EXTRACTS FROM VI	TAL	STA	TISTICS	FOR
THE Y	EAR.			
BIRTHS:—				
		Male	Female	Total
Live Births—Legitimate		252	238	490
—Illegitimate	••••	24	15	39
Total		276	2.52	
1 Otal	••••	276 ——	253	529
Birth Rate per 1,000 of popu	ılation	, 19.4.		
Still Births—Legitimate		4	6	10
—Illegitimate	••••	I	I	2
Total		5	7	12
Rate per 1,000 total births,	22	.2.		
DEATHS:—				
Total Deaths (all causes) Death Rate per 1,000 of		152	176	328
population	••••		12.3	
Deaths from Puerperal Causes:				
		_	per 1,000	
Deaths	(L	ive and	d Still) Bir	ths
From Sepsis nil From Other Causes 2			nil	
From Other Causes 2			3.7	
Total 2			3.7	

## Death Rate of Infants under one year of age:

All Infants per 1,000 live births	59
Legitimate Infants per 1,000 legitimate live births	55
Illegitimate Infants per 1,000 illegitimate live births	103

# Deaths from

Cancer (all ages)		****	•	38
Measles (all ages)		• • • •	••••	nil
Whooping Cough (all ages)				nil
Diarrhoea (under 2 years of ag	ge)	****		4

#### POPULATION.

The Registrar-General's estimate of population at midyear 1946, is given as 26,690—an increase of 730 as compared with the figure for the previous year. Since 1941, the Registrar-General has been showing a continuous decline in his estimates, and it was one's opinion that he was getting under the actual figure so that the increase in this year's estimate is probably nearer to the real figure.

The annual figures since the formation of the District are as follows:—

1934	• • • •					28,235
1935	• • • •	• • • •	••••	• • • •		28,000
1936			••••	• • • •	• • • •	27,510
1937	• • • •	• • • •		• • • •	••••	26,710
1938		• • • •	• • • •	• • • •	• • • •	26,370
1939		••••		• • • •	• • • •	26,160
1940	• • • •	••••	• • • •	••••	•••• "	27,260
1941		••••	• • • •	• • • •	• • • •	28,350
1942		• • • •	••••	• • • •	• • • •	27,600
1943	• • • •	• • • •	• • • •	• • • •	• • • •	27,060
1944		• • • •		• • • •		26,510
1945	• • • •	****	• • • •	• • • •	• • • •	25,960
1946	• • • •	• • • •	• • • •	• • • •	• • • •	26,690

#### BIRTHS.

Birth Ra	te per 1,000 of population		19.4
,, ,,	England and Wales		19.1
,, ,,	Rural Districts of Cumberland	****	18.6
,, ,,	Urban Districts of Cumberland	• • • •	20.9
,, ,,	County of Cumberland		19.5

The number of births registered during the year was 529—276 males and 253 females—of whom 39—24 males and 15 females—were illegitimate. The number shows an increase of 69. The Birth Rate was 19.4 per 1,000 of population, a figure which is 1.7 higher than for the previous year, and just slightly over the figure for the country as a whole.

#### DEATHS.

Death	Rate	per 1,000 of population		12.3
,,	,,	England and Wales		11.5
,,	,,	Rural Districts of Cumberland	• • • •	12.1
22	22	Urban Districts of Cumberland	• • • •	13.2
11	11	County of Cumberland	••••	12.6

The nett deaths for the District after making adjustments for inward and outward transfers, *i.e.*, after adding the number of residents who died outside the District but were normally resident in the District, and deducting those who died in the District but were normally resident outside, numbered 328—152 male and 176 female—an increase of 28 compared with the number for the previous year.

This gives a Death Rate of 12.3 as compared with 11.6 for the previous year, an increase of 0.7, as compared with an increase of 0.1 for the country as a whole.

The chief causes of death were Diseases of the Heart and Circulatory System 121, Cancer 38, Pneumonia, Bronchitis, and other Respiratory Diseases 38, and Tuberculosis 20.

The following two Tables show the age at death of all cases and causes of death.

Total AGE AT DEATH OF ALL CASES, ENNERDALE RURAL DISTRICT, 1946. OI to 65 to 45 to 35 10 25 to 20 IO to IS 50 01 w 5 4 3 0 6 to to Age Groups Females

# CAUSES OF DEATH DURING THE YEAR 1946

	Causes of D	eath			Males		Females
All causes			••••		152		176
Typhoid and	l Paratyphoid	Fevers		1			<u> </u>
Cerebro-Spir				****	Out.		. 1
-	r						3 -
	ough						
Diphtheria				• • • •			1
-	of Respirato				10		7
	culous Disea	-	• • • •	f specific	2		1
Syphilis	• • • • • • • • • • • • • • • • • • • •	***	• • • • •	••••	. 1	£.	
Influenza	• • • • • • • • • • • • • • • • • • • •		****		1		2
Meas¹es		* * * *					_
Encephalitis		***	• • • •				
Cancer				••••	17	£	21
Diabetes	••••	****	••••		Jan.		4
Cerebral Hae	emorrhage				- 6	ş	21
Heart Diseas	_	• • • •			38	7	39
Other Circul		es		****	7		10
Bronchitis		,			4		5
Pneumonia (	all forms)	• • • •			6		10
Other Respir	· ·			••••	11		2
Ulcer of Stor	-				5		
Diarrhoea (u				****	4		
Appendicitis			• • • •		_		1
Other Digest					3	-49	8
Nephritis	••••				1		3
Puerperal Se				-	-		
Other Materi	-	***					2
Congenital D							
_	Ialformations				9		8
Suicide	••••	****	••••	* * * *	3		
Road Traffic	Accidents	****		***	2		_
Other Violen		****	***		4		8
All Other Ca		• • • •		* * * *	18		22

#### INFANTILE MORTALITY.

Death Rate of Infants under one year of age per 1,000 live births:—

# Legitimate, 55; Illegitimate, 103; Total 59

England and Wales			43
Rural Districts of Cumberland	• • • •	••••	46
Urban Districts of Cumberland	• • • •	• • • •	48
County of Cumberland	* * * *	••••	47

The deaths of children under one year of age numbered 31—16 male and 15 female. This gives an Infantile Mortality Rate of 59, which is 20 higher than the rate for the previous year. That rate was, however, phenomenally low, being fifteen less than the best rate ever previously recorded for the District. With small numbers, one inevitably gets disproportionate variations from year to year and it is unsafe to found arguments on one year's figures. Eighteen of the thirty-one deaths—58%—occurred in the neo-natal period, i.e., within one month of birth—in fact over one-third of the total occurred within one week. These might justifiably be looked upon as non-preventible, but in the older age groups one cannot help feeling lives were lost that might conceivably have been saved.

The chief causes of death were Prematurity and Congenital Defects which together accounted for 17, and Respiratory Diseases which accounted for 6. The Mortality Rate for male children was 58, and for female children was 59.

3

INFANTILE DEATHS SHOWN BY AGES AND CAUSE OF DEATH, 1946.

Total	Deaths.	6	&	9	4	3	1	31
	9—12		1		1		1	
S.	6—9			7		1		2
ONTH	3-6		П		П	П	П	4
AGE IN MONTHS.	2—3			2		-		E
AGE	1—2			2	-	1		4
	Under 1 M'th	6	7		2	]	]	18
	3-4				l		I	
VEEKS.	2—3				2			3
AGE IN W	1—2		60			1		4
AGE	Under 1	7	4					11
		:	oility					
	ATH.	:	and De	i			:	
CAUSE OF DEATH.		:	nations	ımonia	:	ion		
		Sirth	Walforn	nd Pne	ritis	uffocati		
		Premature Birth	Congenital Malformations and Debility	D Bronchitis and Pneumonia	Gastro-Enteritis	Accidental Suffocation	Pul. T.B.	

# BIRTHS, INFANTILE DEATHS, AND MORTALITY BY PARISHES.

		egistered Births	Infantile Deaths	Infantile Mortality Rate
Arlecdon and Frizington	ı	77	4	52
Cleator Moor		128	- 7	55
Distington	• • • •	43	4	93
Egremont	• • • •	103	7	68
Ennerdale and Kinniside	e	8	1	
Gosforth	••••	15	4	267
Haile	• • • •	5	<del> jiha</del>	
Lamplugh	• • • •	15	_	
Lowca	***	12	_	_
Lowside Quarter	••••	3	_	
Moresby	• • • •	22	2	91
Netherwasdale	••••	I		-
Parton	••••	24	3	125
Ponsonby			_	_
Rottington	****		_	
St. Bees		10		
St. Bridgets	••••	7 -	_	
St. Johns	••••	10	I—	_
Weddicar	••••	9		
Registered outside Distr	rict	37		
		Ç.,	· ·	
Total	••••	529	31	59
			_	_

# B.—GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

#### I.—Public Health Officers.

A list of these, as at the end of the year, is given at the beginning of the Report.

#### II.—Services Provided in the Area.

(a) Laboratory Facilities. Clinical material and milk samples are sent to the Cumberland Laboratory, Carlisle Infirmary, and water samples to the County Analyst at Darlington.

General practitioners send clinical specimens at the Council's expense when these are required for the diagnosis of notifiable diseases, the cost being met by a block grant based on the average number being sent prior to the date when this system was introduced in 1941.

The following specimens were sent by practitioners during the year:—

		Positive	Negative	Total
Diphtheria	 • • • •	4	36	40
Tuberculosis		ΙΙ	73	84
Coli-Typhoid	 		9	9
Others	 		4	4

(b) Ambulance Facilities. The arrangements have been described in previous reports, and the district is adequately served. For infectious cases, the West Cumberland Joint Hospital Board provides two ambulances, one stationed at Galemire Hospital, Cleator Moor, and one at Ellerbeck Hospital, Workington. For non-infectious cases, an ambulance is provided and maintained at Whitehaven by a Joint Ambulance Committee, of which Ennerdale is a member.

#### C.—SANITARY CIRCUMSTANCES OF THE AREA.

Sanitary matters are dealt with fully in a report by Mr. Brown, Chief Sanitary Inspector, which is printed as an appendix. There is one matter I shou'd like to comment upon—namely milk samp'ing.

For a number of years there has been a system of milk sampling in force which has worked very satisfactorily and under which the Local Authorities and the County Council have pooled the information and shared the cost, the samples being taken by the local Sanitary Inspectors.

Under the Milk (Special Designations) Order 1936, laboratory tests for T.T. and Accredited milks are laid down, viz.: that they shall satisfy a methlene blue reduction test and shall be found to contain no coliform bacillus in one-hundredth of a millilitre.

It has been the custom to take samples of T.T. milks each month and of Accredited each quarter, and the results obtained are passed to the Licensing Authority (i.e. the County Council) which has the power to suspend or rescind the licences if milks persistently fall below the standard. No corresponding test has been laid down for ungraded milks, but it was customary in the past to submit samples of ungraded milks for the same laboratory tests, taking the Accredited standard as satisfactory. As there is no official standard, the results of ungraded samples could be looked upon as "for information only" and no action could be taken directly on the results.

In 1944, the National Milk Testing and Advisory Scheme of the Ministry of Agriculture and Fisheries was instituted, under which officials may take samples from all farms for examination by a Resazurin Test. This is a decolorisation test designed to show the general keeping quality of the milk, but differing from the Methylene Blue colour test. By the results of it milks are classified in three groups (a) Market (b) Salvage (c) Rejected, and the prices paid for them by the Milk Marketing Board determined accordingly.

Under this scheme officials of that Ministry visit premises, take samples, and presumably advise on production methods, but there is no co-operation of any sort with Local Authorities. The latter receive no information of the results of these tests or of the results of inspection, except that the local Sanitary Inspectors are continually being informed by producers that they have had other inspectors taking samples and inspecting their premises. This happens in the case of Producer-Retailers who sell their milk locally, as well as in the case of producers sending their milk direct to the Board.

It seems obviour, therefore, that this must inevitably lead to a very considerable amount of overlapping, and must give rise, and does, to an idea in the minds of producers that the community is becoming overburdened with officials when different sets of officials seem to be doing the same job without one set apparently knowing anything of the other.

Whilst the scheme of the Ministry of Agriculture does not relieve the Licensing Authority of the responsibility of having T.T. and Accredited milks sampled regularly, it does seem to me that it renders the sampling of ungraded milks by Local Authorities somewhat redundant. In fact it seems to be the initial step to lifting the matter entirely out of their hands, and it would be well to have the whole position simplified and clarified so that one authority might handle the whole business without the present overlapping and danger of working at cross-purposes.

Under the circumstances a large amount of the sampling of ungraded milks previously done by the Local Authority has been cut out and efforts concentrated chiefly on T.T., Accredited, and milks supplied to schools.

# D.—PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

I.—Notifiable Disease, other than Tuberculosis.

The number of cases of infectious disease, other than Tuberculosis, notified during 1946, are shown by age, admission to hospital, and deaths, in the accompanying Table.

The district was remarkably free from any disease of an epidemic character, and, excluding Pneumonia and Tuberculosis, the only deaths from infectious diseases were one from Diphtheria and one from Cerebro-Spinal Meningitis.

	Total Deaths	1	Ħ	1	16	——————————————————————————————————————	1	1	1	1
I v	ot bəttimbA Hospital	3	9	1	15		1		3	
; • 0	Over 65	1	1		· ∞	7	1	-		
	45 to 65	1		1	4	7		1	1	
/10	35 to 45	ni		-	7	0 1	1	1	1	
	20 to 35	Т	ηĽ	H	,,9		1	1	10	
	15 to 20	<b>.</b>					Li,	1	-	
AR.	. 01 ot 21	ŵ	<b>.</b>			1	1	-		
E XE	5 to 10		8		1	1	9	16	1	
THI	4 3 7	-		1	73	1	4	· W	-	
D'Z	€ 54	2	. =		ħ)	/	3	3	(F) n	٠, ٣
JRII	3 2 2	<b>.</b>		I,	-	l	-	3	1	
lo s	- <sup>2</sup> 2	19	4			10	-	3		
SES	Under 1 Year			1	-		7	-	7	
ISE/	Total Cases Notified	10	9	2	25	2	17	31	3	•
E D	1 2 - 1		:	:	•	:		:		
ABL	-	:	:	:	*	•	:	•	4	
NOTIFIABLE DISEASES DURING THE YEAR.		•	•	•	nzal)	ŧ	:	į	÷	
Z	DISEASE.	•		•	Influe	i	:		i	
	DIS	•	•	*	and /	:	:	:	L C	
		: !:	•	yrexia	(Primary	i	:	ongh •	nal-Fev	
		Scarlet Fever	Diphtheria	Puerperal Pyrexia	Pneumonia (Primary and Influenzal)	Erysipelas	Measles	Whooping Cough	Cerebro-Spinal-Fever	
		01	jamed.	14	14	щ				

l t

Scarlet Fever.

Ten cases of Scarlet Fever were notified during the year, giving a rate of 0.37 per 1,000 of population, compared with 1.38 for England and Wales. Three of the cases were admitted to hospital. There were no deaths from this disease.

#### Diphtheria.

Six cases were notified during the year, all of whom were removed to hospital. Actually 8 cases were admitted to hospital as Diphtheria or suspected Diphtheria, and the diagnosis was confirmed in 6 cases, giving a rate of 0.22 per 1,000 of population as compared with 0.28 for the whole country. There was one death—that of a young child who had not been immunised and who was in a moribund condition when admitted to hospital.

#### DIPHTHERIA PROPHYLAXIS.

Immunisation of children in the area has been carried out under local arrangements since 1936.

The County as Child Welfare Authority and Education Authority, carries out the actual immunisation, but the recording and the rendering of the Ministry's returns still remains the responsibility of the Local Authority, until the Medical Service Act comes into force.

During 1946, a total of 836 new immunisations were completed—600 in the 0-5 years-of-age group, 235 in the 5-15 years-of-age group, and I outside these groups.

In addition, 432 children were re-immunised. Reimmunisation has been made available for children, who have been immunised in infancy and are now beginning school, and for older children whose immunisation was done more than four years ago.

The total number of children immunised since the scheme began in 1936, has now reached the total of 7,860 and these are shown by ages at the time of their original immunisation in the accompanying Table.

Percentages of Child Population Immunised.

# (a) 0-5 years of age.

The number of children in the age-groups 1942-1946 inclusive who were immunised on the 31st December, 1946,

and of whom the Local Authority has details, was 1,199. The Registrar-General has supplied a figure of 2,400 for these groups, which gives a percentage of 50, which is eleven better than the figure for 1945, but is still too low to confer effective protection to the pre-school population. Immunisation is given free at the County Welfare Clinics and it is greatly to be deplored that parents are still so apathetic as to neglect this most vital protection.

## (b) 5-15 years of age.

The number of children in the age-groups 1932-1941 inclusive who were immunised on the 31st December, 1946, of whom the Local Authority has details was 4,136. For this group the Registrar-General has supplied a figure of 4,480 which gives a percentage of 92.

## (c) Over 15 years of age.

The number over 15 years of age on the 31st December, 1946, who have been immunised was 2,525, in addition to whom 1,168 were immunised under County arrangements in 1936, in the then age-groups 11-14, in connection with attendance at school camps, but the Local Authority has no details of these and they are not included in the Table.

PERSONS INOCULATED EACH YEAR FROM 1936-1946.

	Total inoculated aged under five years on 31st December, 1946.	Total inoculated aged 5-14 years on 31st December, 1946. Total inoculated aged 15 years and over on 31st December, 1946.	Grand Total 1936-46   7860
1946	1 223 193 121 62	52 63 29 18 14 11 10 10	836
1945	158 84 24 17	15 8 7 8 7 8 7 8 7 8 8 7 8 8 7 8 8 7 8 8 7 8 8 7 8 8 7 8 8 7 8 8 7 8 8 7 8	323
1944	115 98 35 44	64 52 32 9 11 16 9	512
1943	 119 148 118	138 74 42 26 19 18 17 16 27 27	911
1942		238 163 84 54 45 34 34 36 5 5	1168
1941	30 55 54 73	200 173 96 70 61 61 13 6	996
1940	1 1 26	104 127 38 30 22 13 10 5	418
1939	18	88 81 52 22 15 17 19 115 115	377
1938	1 1 22	91 92 50 44 30 25 21 18	477
1937	35	87 67 79 71 70 53 46 117 12 8	551
1936	6 62	192 212 208 200 270 200 75 21 34 9	1321
Age in years on 31st Dec. of the corresponding year	0 1 2 8 4	5	Total each yr.

#### Puerperal Pyrexia.

Two cases of Puerperal Pyrexia were notified during the year, both being notified from Whitehaven Hospital. This gives a rate per 1,000 total births of 3.7 as compared with 8.5 for England and Wales.

#### Pneumonia.

Twenty-five cases of Acute Primary or Influenzal Pneumonia were notified, a decrease of 19 compared with the previous year. The rate per 1,000 of population was 0.94 as compared with 0.89 for the country as a whole. There were 16 deaths—seven more than in the previous year.

#### Erysipelas.

Five cases were notified—a decrease of fourteen on the figure for 1945—giving a rate of 0.19 per 1,000 of population compared with 0.22 for the whole country.

#### Measles.

Only seventeen cases were notified as compared with 478 for the previous year, giving a rate of 0.64 per 1,000 of population compared with 3.92 for the whole country. There were no deaths.

## Whooping Cough.

Thirty-one cases were notified as against one last year. This gives a rate of 1.16 per 1,000 of population compared with 2.28 for England and Wales.

# Cerebro-Spinal Fever.

Three cases were notified and were admitted to hospital where one died, the others making complete recoveries. Another case was admitted as suspected Cerebro-Spinal Fever, but the diagnosis was negative. The three confirmed cases were from widely separated parts of the district with no apparent connection of any sort. The rate was 0.11 per 1,000 as compared with 0.05 for the country as a whole.

#### II.—CANCER.

There were 38 deaths from Cancer during 1946—17 males and 21 females—giving a Mortality Rate of 1.42 per 1,000 of population, as compared with a rate of 1.84 for the country as a whole.

Deaths from this disease were 2 more than in the previous year.

The sites of the primary lesions in the two groups were as follows:—

Mal	es			Females			
Stomach	••••		6	Oesophagus	••••	••••	I
Pancreas	• • • •	***	I	Stomach	••••		7
Liver			I	Gall Bladder	• • • •	••••	I
Caecum			I	Rectum		• • • •	I
Colon	• • • •		3	Bladder	• • • •	• • • •	I
Bronchus			I	Breast		• • • •	3
Lung	• • • •		2	Ovary		• • • •	2
Mediastinum			I	Uterus		• • • •	3
Not stated		• • • •	I	Not stated			2
			17				21

The average age at death of all cases was 63, the figure being 61 for males and 65 for females.

# III.—PUBLIC HEALTH (PREVENTION OF TUBER-CULOSIS) REGULATIONS, 1925.

No action was taken under Section 62 of the Public Health Act, 1925, or Section 172 of the Public Health Act, 1936.

#### IV.—TUBERCULOSIS.

The following Table shows the new cases and mortality for the District during 1946:—

Δ		New (	Cases		Deaths				
Age Periods	Resp	iratory	Non-Resp't'y		Resp	iratory	Non-Resp't'y		
	Male	Female	Male	Female	Male	Female	Male	Female	
0-1	0	1	0	0	0	1	0	0	
1 5	0	0		0	0	Ō	Ö	0	
510	0	1	0	0	0	0	0	0	
10—15	0	0	0	1	0	0	0	0	
1520	4	5	1	0	2	1	0	0	
20-25	1	3 5 3 2 0	0	2	0	2	0	0	
2535	4	5	1	1	2	1	0	0	
3545	1	3	2	0	1	1	0	. 0	
4555	4	2	0	1	1	0	1	1	
5565	3 5		0	0	3	0	0	0	
65 and	5	0	1	0	1	1	1	0	
upwards									
Total	22	20	5	5	10	7	2	1	

# New Cases.

New cases numbered 52—42 Respiratory and 10 Non-Respiratory, a decrease of five as compared with the number for the previous year—the decrease being all in the Non-Respiratory group. Included in the total are eight deaths which had not been previously notified and two cases discharged from H.M. Forces.

#### Deaths.

There were twenty deaths from Tuberculosis—eight less than in the year before, the decrease being spread over all groups—three in each of the Respiratory groups, male and female, and one each in the Non-Respiratory groups.

The death rate from Tuberculosis was 0.75 per 1,000 of population—an improvement for the year of 0.33. The rate is still 0.21 in excess of the rate for the whole country, but it is the best that has ever been recorded since the formation of the District, the previous best being 0.92 in 1943, and the average annual rate for the twelve previous years of the District's existence being 1.28.

The Death Rate per 1,000 of population as compared with that for England and Wales is shown below:

	Enne	erdale Rural District	England and Wales
Respiratory		0.64	0.46
Non-Respiratory	• • • •	0.11	0.08
All Forms		0.75	0.54

Eight, or 40%, of the deaths were not previously notified. In all such cases an explanation is asked for from the practitioner concerned. In four of these cases, the presence of Tuberculosis was disclosed by a post-mortem examination.

The number of cases belonging to the district who received Sanatorium treatment during the year are shown in the following Table:—

# SANATORIUM TREATMENT.

(=====================================							
			In Institu- tions 1st Jan. 1946		Dis- char- ged	Died	In Institu- tions 1st Jan. 1947
Pulmonary Cas	es:						
Men Women	••••	• • • •	8 6	11 13	13 10	1 2	5 7
Boys	••••	****	1		1		
Girls	••••	••••	-	1	***************************************		1
Non-Pulmonar	y Cases	•					
Men	•••	••••	1	3	2		2
Women	***	••••		2	_		2
Boys	****		_	1			1
Girls		****		1	1		
Observation Ca	ases:						
Males	•••			4	2		2
Females	••••	***	1	2	1		2
	Total	••••	17	38	30	3	22

The number of cases on the Tuberculosis Register at the end of 1946 was:—

Respiratory—Males	• • • •	• • • •	***		107
—Females		• • • •		• • • •	89
Non-Respiratory—Males			4 • • •	• • • •	42
—Females	• • • •	• • • •	•••	• • • •	49
			Total	•••	287

# APPENDIX.

# SANITARY INSPECTOR'S REPORT

# SANITARY INSPECTOR'S ANNUAL REPORT, 1946.

## SANITARY INSPECTION OF THE AREA.

The following is a summary of the inspections carried out under the Public Health and other Acts during the year 1946.

## GENERAL SANITATION.

	water Supplies	• • • •		• • • •			180
	Drainage						282
	Stables and Piggeries		• • • •	• • • •	• • • •	• • • •	9
	Fried Fish Shops	••••					20
	Tents, Vans and She	eds		• • • •			16
	Factories					• • • •	39
	Workshops				• • • •		I
	Bakehouses						25
	Public Conveniences						32
	Theatres and Places	of Ente	ertainm	ent			5
	Refuse Collection		• • • •				42
	Refuse Disposal	• • • •	••••	••••	• • • •		42
	Rats and Mice Destr			••••		•••	47
	Schools	•	••••				12
	Shops						54
	Miscellaneous Sanita				• • • •		62
	0 701 4	••••			• • • •	• • • •	27
HO	USING.						
110	COIIIG.						
	Visits to Houses und	er Publ	ic Hea	lth Act	S		605
	Visits to Houses und	er Hou	sing A	cts	• • • •	• • • •	2402
	Visits to Houses re C		_		••••		44
	Visits to Houses re I		_		1	••••	29
	Miscellaneous Housi				• • • •	• • • •	170
		O					,
TNIE	ECTIOUS DISEAS	SEC					
11/1	ECTIOUS DISEA	oes.					
	Inquiries into Cases	of Infec	ctions l	Disease			88
	Visits re Disinfection	of Pre	mises	20000	••••	••••	26
	Miscellaneous Visits			• • • •			
							50
OFIF	DEDITION OF TO	OD (E		ANTO	DDII	10.4	
SUF	PERVISION OF FO	DD (F	OOD	AND .	DRUG	15 A	CT).
	Inspection of Butche	rs' Sho	ps				21
	Inspection of Fishmo		_				6
	The state of a sought						0

Inspection of Grocers		90
Inspection of Greengrocers and Fruiterers		7
Inspection of Food Preparing Premises		II
Miscellaneous Food Visits		24
Inspection of Cowsheds		502
Inspection of Dairies and Milkshops		458
Ice Cream Premises	• • • •	17
Restaurants		5
Street Vendors and Hawkers Carts		2

#### HOUSING.

3,007 Inspections were made of 2,693 houses.

As a result of inspection 525 houses were found not in all respects fit for human habitation; 232 houses were rendered fit in consequence of informal action; Statutory Notices were served in respect of 19 houses and 16 houses were rendered fit as a result.

Eleven informal notices were served under the Housing Acts in respect of 11 houses, 10 houses being made fit as a result.

Shortage of materials and skilled labour continued to restrict action to the remedy of the grosser housing defects and insanitary conditions.

During the year 443 Civil Building Licences were issued for an estimated expenditure of £27,303 which included improvements in respect of 368 houses.

The category and sanitary needs of the house in each case receive consideration before a licence is issued.

Of the three matters referred to in the Annual Report for 1945 (a) North Road Re-development (Town & Country Planning Act 1944—Sec. 9) this scheme has been deferred indefinitely (b) Parton Clearance Orders Nos. 1-17 (1936) no progress made and (c) Pica, Parish of Distington—the sanitary improvements were in hand at the close of the year and are referred to later in this report.

The Rural Housing Survey was completed and the 5,816 houses included in the preliminary survey, the provisional categorisation was as follows:—

Category 1—Satisfactory in all respects.

" 2—Minor defects only.

- ,, 3—(a) Requiring repair, structural alteration or improvement to render them in Category 1.
  - (b) Requiring repair, structural alteration or improvement to render them reasonably fit for habitation.
- ,, 4—Appropriate for reconditioning under provisions of a Housing (Rural Workers) Act.
- ,, 5—(a) Unfit for habitation but could be rendered reasonably fit for a limited period at an unreasonable expense.
  - (b) Unfit for habitation and incapable of being rendered reasonably fit but not falling in the immediate previous sub heading.

PARISH	Total No. Houses		Provisional CATEGORIES					
		1	2		3	4		
				a	b		a	Ь
Gosforth	164	24	1	35	54	11	27	12
Egremont	1236	52	9	76	476	4	312	307
Haile	26	3		6	3		5	9
Netherwasdale	24	8	2	1	5	2	3	3
St. Bridget's	150	33	5	39	39	4	14	16
Ponsonby	14	3	_	2	1	2	5	1
St. John's	123	17	6	40	40	6	4	10
Lowside Quarter	107	7	1	8	75	_	6	10
Arlecdon & Frizington	1065	20	8	75	399	1	134	428
Distington	363	25	26	35	163		34	80
Moresby	165	19	6	17	91		8	24
Lowca	169	7	11	7	140	1	2	12
Parton	244	8	11	14	119		32	60
St. Bees	291	59	38	45	51	5	76	17
Rottington	10	1	-	8	17		_	1
Ennerdale & Kinniside	45	4 2	2	10	17	4 7	2	6
Weddicar	109		11	22 132	55 768	1	18	5
Cleator Moor	1349	79	16	1		1	311	48
Lamplugh	162	22	10	25	42	1	28	28
	5816	393	142	597	2538	48	1021	1077

In addition to the foregoing houses there are 1,194 houses erected under various Acts of Parliament and styled Assisted Housing and 445 farm houses. A survey of the latter has now been completed and although not forming part of the Rural

Housing Survey a provisional categorisation has been made and to complete the record they are shown in the table below.

PARISH	Total No:		CATEGORIES					
·	Farm Houses	1	2	a	3 b	4	a	5 b
Gosforth Egremont Haile Netherwasdale St. Bridget's Ponsonby St. John's Lowside Quarter Weddicar Cleator Moor Ennerdale & Kinniside Rottington St. Bees Arlecdon & Frizington Distington Moresby Lowca Parton Lamplugh	55 26 27 16 30 12 25 23 11 16 41 7 16 42 28 9 11 1	8 4 6 6 2 6 6 1 2 3 4 3 3	2 4 2 1 1 1 1 1 2 6 5 1 2	38 12 18 8 18 6 14 11 4 7 12 — 1 14 17 7 6 1 17	5 4 6 1 5 3 4 6 6 8 19 3 9 15 1 1 1 3	1	1 2 - - - 7 - 2 2 - 3	
	445	58	36	211	118	1	17	4

116 of the 1194 houses in Assisted Housing Schemes provided under the Housing Acts 1909 and 1925 are by reason of design and amenity in Category III.

From the foregoing records it will be clear that there is a large amount of work to be done to prevent further houses from drifting into Category V and this largely depends upon considerations referred to in the last Annual Report and an increase in the amount of skilled labour and materials becoming available.

In the provision of new houses it was almost the year end before bricks and bricklayers became available in sufficient numbers to make any real progress. At Wath Brow, Cleator Moor (48 houses) 30 were in various stages of construction but only four were ready for the slater at the end of the year. At Rydal Street, Frizington (28 houses) no progress was made on the buildings.

Of the 18 Swedish houses under construction (Beckermet (6), Gosforth (6), St. Bees (6)) completion of the six at Beckermet Moor was delayed for lack of bricks, flashings, glass, plumbing, and electrical fittings.

50 Aluminium Temporary Bungalows were completed at Frizington and sites acquired for 25 each at Bigrigg and Cross Side in the Parish of Egremont and for 10 at Crossfield Road, Cleator Moor.

To end months of frustration which had been experienced by the Council regarding schemes prepared for sites at Egremont (Gully Flatts and Hagget End) they perforce had to adopt a site at Smithfield (250 houses) the use of which by any private builder would have raised questions regarding his mental balance.

These feeble results in no way reflect the efforts of the Council and its Officers to provide the houses so badly needed in the district. There is little evidence that 1947 will see much greater progress.

#### OVERCROWDING.

Arising out of the housing survey, the following cases of overcrowding were disclosed.

No. of Houses overcrowded	 ••••		57
No. of families concerned	 * * * *	• • • •	62
No. of persons concerned	 ••••	* * * *	$411\frac{1}{2}$

#### INSPECTION AND SUPERVISION OF FOOD.

## (a) Milk Supplies.

#### Producers.

Tuber culin Tested			• • • •	16
Accredited	••••	• • • •	• • • •	22
Ungraded	••••	• • • •		357
Retailers.				
Producer Retailers	• • • •			64
Non-Producer Retailers		••••	• • • •	4
Wholesale and Retail Prod	ucers			58
Wholesale Producers				265

During the year 502 advisory visits were paid to dairy farms and in consequence of informal action 6 new cowsheds were built, 10 renovated and 15 new dairies constructed.

## (b) Sampling of Milk.

During the year the scheme for co-operation with the County Authority in regard to the taking of samples of milk was continued.

Two hundred and ten samples were taken and submitted for examination, the results being as follows.

			No. of	Said	77
		3	amples	Satisfactory	Unsatisfactory
Tuberculin 7	<b>Tested</b>	• • • •	82	69—84%	13—16%
Accredited	••••		86	64—74%	22—26%
Pasteurised	••••	• • • •	14	10-71%	4-29%
Ungraded	• • • •		28	15-54%	13-46%
		-			Antagonia (m. 1914)
			210	158—75%	52-25%
		-			

No samples showed evidence of T.B.

In the above table the standard taken as satisfactory for ungraded milks is that required for accredited milk.

## (c) Food Inspections.

One hundred and fifty eight inspections were made of premises where food is prepared for sale, stored for sale, or sold. The premises and methods were for the main part satisfactory. The following table shows the amount of food condemned as unsatisfactory during the year.

Commod	lity			Weig	ht in Po	ounds
Ham			 		15	
Milk (Tinne		• • • •	 ****	• • • •	33	
Fish (Tinnec	& Free	sh)	 		75	
Fruit			 		31	6
Vegetables			 		212	
Cheese	• • • •	e e**e**	 		123	
Pork	• • • •	** * * *	 • • • •		4	
Beef			 		340	
Bacon			 		13	
Soups and S	undries		 		9	
Preserves	••••		 14.44		73	
Cereals	• • • •		 		145	
Eggs (Drie	ed)		 		42	
Cooking Fat		• • • •	 • • • •	••••	137	
Canned Mea	t		 		36	

#### WATER SUPPLY.

- (i) The public water supplies in the Rural District are derived from:—
  - (a) Hollow Moor, Parish of Gosforth.
  - (b) Coldfell, Parish of Ennerdale and Kinniside.

- (c) Wormgill, Parish of Ennerdale and Kinniside.
- (d) Meadley, Parish of Ennerdale and Kinniside.

(e) Cogra, Parish of Lamplugh.

(f) Owsen Fell, Parish of Lamplugh.

(g) Lamb Hill and Sooty Fields, Parish of Moresty.

In addition the Corporation of Whitehaven afford a bulk supply from Ennerdale Lake to the village of Parton and a detailed supply to 135 houses in the parishes of Ennerdale and Kinniside (2) Weddicar (115) St. Bees (17) Rottington (1) along the route of their trunk mains.

- (i) (a) The supply from Coldfell has been reported unsatisfactory on a number of occasions from alleged surface pollution. There are no habitations on or above the gathering ground. The water supplies from the other six sources are regarded as satisfactory.
  - (b) All the water supplies are adequate in quantity except Owsen Fell and Lamb Hill and Sooty Fields, but these supplies can be augmented from Workington and Whitehaven respectively.

The Wormgill supply is becoming inadequate as the storage is insufficient for the increased demand, and any deficiency that arises from defects in the distributive system is immediately felt.

(ii) Five samples of the water from the Coldfell supply were submitted for bacteriological examination, four of which were not wholly satisfactory but the fifth showed improvement. No chemical analyses were carried out.

Three samples of water from private supplies were also submitted for bacteriological examination, one from a farm in the parish of Lamplugh being unsatisfactory.

- (iii) The supplies from Cogra and Owsen Fell are potentially plumb-solvent and are treated at the source. Satisfactory reports were received of both supplies.
- (iv) Work was carried out on the gathering ground at Coldfell, to prevent stagnant water from gaining access to collecting pipes.
- (v) The number of houses supplied with water by piped supplies from public water mains and from private sources in respect of each parish is shown in the following table.

рарсп	No.	Source of	No. Houses with Piped Supply	n Piped Supply	Without Pined Supply
FANISH	Cospora	t donc Suppiy	Public Supply	Private Supply	fidding nadit
Gosforth	219	Hollow Moor	189	15	15
Ponsonby St Bridget's Beckermet	180	Hollow Moor & Coldfell	145	30.	7 10
	53		39	10	4
St. John's, Beckermet	331	Coldfell	325	7	7,
Lowside Quarter	130	Coldfell	63	<i>د</i> ،	64
Egremont	1544	Wormgill	1542	<b>— 1</b>	→ (
St. Bees	307	Wormgill & Meadley	300	2	7
Rottington	17	Wormgill & Meadley	17		1
Cleator Moor	1676	Meadley & Cogra	1667	6	1.
Arlecdon & Frizington	11117	Cogra	1105	∞	4.0
Lamplugh	211	Cogra & Owsen Fell	188	15	∞ ;
Ennerdale & Kinniside	98	Cogra	24	41	21
Weddicar	120	Ennerdale Lake	113	ر ا	7
Moresby	252		229	17	9
Parton	349	Ennerdale Lake & Lamb Hill	349	'	1 '
Lowca	180	Owsen Fell	174		D
Distington	617	Owsen Fell	297	19	<b>-</b> ;
Netherwasdale	40	Nil	1	30	10
	7455		7088	215	152

The number of houses supplied from standpipes is 90 all in the parish of Distington.

New 4 inch water mains were laid to the 90 houses at Pica. Chaos has been occasioned because the iron saddles necessary to make the house connections have been unprocurable.

Apart from extension of mains to new housing estates at Cleator Moor and Frizington no other improvements to the water undertakings were effected.

With the confirmation of the Whitehaven Corporation Waterworks Order 1947, the Consulting Engineers retained by the Council are now in a position to prepare their schemes for the improvement of the Council's water undertakings.

# DRAINAGE, SEWERAGE AND CLOSET ACCOMMODATION.

The Rural Housing Survey disclosed that 437 houses were connected to private means of sewage disposal (septic tanks and cesspools) and that 830 houses were on the conservancy system of excremental disposal.

New sewers were laid to the 90 houses at Pica and the drains from 60 houses connected thereto.

Apart from extensions of sewers to new housing sites at Cleator Moor and Frizington no new works of sewerage and sewage disposal were carried out.

13 privies were converted and the drainage connected to new septic tanks.

Lowside Quarter	2
St. Bridget's, Beckermet	2
Cleator Moor	I
Ennerdale and Kinniside	3
Lamplugh	3
Frizington	2

#### REFUSE COLLECTION AND DISPOSAL.

The weekly collection of refuse and disposal in disused quarries continued less satisfactorily than before due to lack of labour and materials. The motor refuse vehicles were frequently held up for spare parts and off the roads altogether for lack of tyres and few dustbins could be obtained as replacements.

According to the Housing Survey 843 houses relied upon the private disposal of refuse.

Council Chambers, Cleator, 17th June, 1947. ROBERT BROWN, Chief Sanitary Inspector.



